



PATENT

Case Docket No. SKFCOND.013A

Date: March 24, 1999

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : McCarty, et al.
Appl. No. : 08/898,678
Filed : July 22, 1997
For : PORTABLE VIBRATION
MONITOR
Examiner : Unassigned

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231, on

March 24, 1999

(Date)

Thomas R. Arno, Reg. No. 40,490

TRANSMITTAL LETTER

ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

ATTENTION: APPLICATION BRANCH

Dear Sir:

Enclosed for filing in the above-identified application are:

- (X) A Supplemental Information Disclosure Statement.
- (X) A PTO Form 1449 with four (4) references.
- (X) Copy of Form PCT/ISA/206 in 1 page.
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Account No. 11-1410. A duplicate copy of this sheet is enclosed.
- (X) Return prepaid postcard.

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Thomas R. Arno
Registration No. 40,490
Attorney of Record

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PATENT

Case Docket No. SKFCOND.013A

Date: June 30, 1999

Page 1

In re application of : William A. McCarty, et al.
App. No. : 08/898,678
Filed : July 22, 1997
For : PORTABLE VIBRATION
MONITOR
Examiner : Hien Vo
Art Unit : 2857

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231, on

June 30, 1999

(Date)

Thomas R. Arno, Reg. No. 40,490

ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

REC)

JUL 14 1999

Sir:

TECHNOLOGY CENTER 2800

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below:

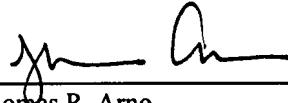
CLAIMS AS FILED

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
Total Claims	12	MINUS	24	= 0 ×	\$18	= \$0
Independent Claims	5	MINUS	7	= 0 ×	\$78	= \$0
If application has been amended to contain multiple dependent claim(s), then add					\$260	= \$0
Time Extension Fee						\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0

Enclosed are:

(X) Return prepaid postcard.

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- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410. A duplicate copy of this sheet is enclosed.



Thomas R. Arno
Registration No. 40,490
Attorney of Record

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